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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Ralph First name Emanuel Middle name		First name Middle name
	Bring your picture identification to your meeting with the trustee.	Anderson Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8203		

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Debtor 1 Ralph Emanuel Anderson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	6926 Crescent Boat Lane	If Debtor 2 lives at a different address:
		Canal Winchester, OH 43110 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Franklin	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number District When Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? □ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

Ralph Emanuel Anderson

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Deb	otor 1 Ralph Emanuel A	nderson	Dodame	Case number (if known)
Par	Report About Any Bu	usinesses	You Own as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a		Number, Street, City, Stat	e & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate bo	x to describe your business:
			☐ Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are	under Subchapter V so that it choosing to proceed under Su v statement, and federal incon	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	For a definition of small	■ No.	I am not filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.		11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	r Have Any	/ Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	· -			Number, Street, City, State & Zip Code

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Debtor 1 Ralph Emanuel Anderson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi	t
counseling because of:	

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Ralph Emanuel A	nderson		Case n	umber (if known)			
Part	6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are ersonal, family, or household purpose."	e defined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.		business debts? Business debts are convestment or through the operation of the				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	u owe that are not consumer debts or bu	usiness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		7. Do you estimate that after any exempt available to distribute to unsecured cred	t property is excluded and administrative expenses ditors?			
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	\$100,0	50,000 11 - \$100,000 101 - \$500,000 101 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million				
20.	How much do you estimate your liabilities to be?	\$100,0	50,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million				
Part	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		document	f no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this locument, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankrupto and 3571	y case can result in fines u		oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Ralph E	manuel Anderson of Debtor 1	Signature of [Debtor 2			
		Executed	on May 19, 2021 MM / DD / YYYY	Executed on	MM / DD / YYYY			

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Debtor 1 Ralph Emanuel Anderson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Philip W. Gerth, Esq. Signature of Attorney for Debtor	Date	May 19, 2021 MM / DD / YYYY
Philip W. Gerth, Esq.		
The Gerth Law Office, LLC		
465 Waterbury Court Gahanna, OH 43230		
Number, Street, City, State & ZIP Code Contact phone 614-856-9399	Email address	philipgerth@gerthlaw.com
0069475 OH		_

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Fill in this infor	mation to identify your	case:		
Debtor 1	Ralph Emanuel A	nderson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		V	4-
		Your a	issets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	163,200.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	138,625.08
	1c. Copy line 63, Total of all property on Schedule A/B	\$	301,825.08
Pa	rt 2: Summarize Your Liabilities		
			i abilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	251,210.59
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	10,155.4
	Your total liabilities	\$	261,366.04
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,569.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,564.29
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Ralph Emanuel Anderson

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____5,887.60

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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				DOCI	ument Page 10 of 62		
Fill	n this informati	on to identify	your case and th	is filing	j :		
Deb	tor 1	Palph Eman	ual Andorson				
Jeb		First Name	nuel Anderson Middle	Name	Last Name		
Deb	tor 2						
Spou	se, if filing)	First Name	Middle	Name	Last Name		
Jnit	ed States Bankru	uptcy Court for	r the: SOUTHER!	N DISTI	RICT OF OHIO		
_							_
Case	e number						☐ Check if this is an amended filing
							amended ming
)ff	icial Form	106A/E	3				
_			_				
<u> </u>	hedule	A/D: P	operty				12/15
Part		h Residence, B			Estate You Own or Have an Interest In		
	No. Go to Part 2.						
	Yes. Where is the	proporty?					
		, р. оролу .					
I.1	6926 Crescer Street address, if ava			What ■ □	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative		laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
1.1					Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure	ed claims on Schedule D:
⊺.1	Street address, if ava	ailable, or other des	scription		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secure Creditors Who Have Class	ed claims on Schedule D: ims Secured by Property. Current value of the
1. 1	Street address, if ava	ailable, or other des	43110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Class Current value of the entire property?	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
.1	Street address, if ava	ailable, or other des	scription		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00	current value of the portion you own? \$163,200.00
.1	Street address, if ava	ailable, or other des	43110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of	current value of the portion you own? \$163,200.00 Sed claims on Schedule D: Current value of the portion you own?
1	Street address, if ava	ailable, or other des	43110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of	current value of the portion you own? \$\frac{1}{2}\$ \$\fra
	Street address, if ava	ailable, or other des	43110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter	current value of the portion you own? \$163,200.00 Sed claims on Schedule D: Current value of the portion you own?
.1	Street address, if ava	ailable, or other des	43110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter a life estate), if known.	current value of the portion you own? \$163,200.00 Sed claims on Schedule D: Current value of the portion you own?
	Street address, if ava	ailable, or other des	43110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter a life estate), if known.	current value of the portion you own? \$163,200.00 your ownership interest nancy by the entireties, or
	Canal Winche City Franklin	ailable, or other des	43110-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$163,200.00 your ownership interest nancy by the entireties, or
1.1	Canal Winche City Franklin	ailable, or other des	43110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter a life estate), if known. Fee simple	Current value of the portion you own? \$163,200.00 your ownership interest nancy by the entireties, or
1.1	Canal Winche City Franklin	ailable, or other des	43110-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter a life estate), if known. Fee simple Check if this is cor (see instructions) m, such as local	current value of the portion you own? \$163,200.00 your ownership interest nancy by the entireties, or
	Canal Winche City Franklin	ailable, or other des	43110-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iteerty identification number:	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter a life estate), if known. Fee simple Check if this is cor (see instructions) m, such as local	current value of the portion you own? \$163,200.00 your ownership interest nancy by the entireties, or
1.1	Canal Winche City Franklin	ailable, or other des	43110-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iteerty identification number:	the amount of any secure Creditors Who Have Class Current value of the entire property? \$163,200.00 Describe the nature of (such as fee simple, ter a life estate), if known. Fee simple Check if this is cor (see instructions) m, such as local	Current value of the portion you own? \$163,200.00 your ownership interest nancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Ralph Emanuel Anderson		Case number (if known)	
ns, trucks, tractors, sport utility ve	ehicles, motorcycles		
e: Canam	Who has an interest in the property? Check one	Do not deduct secured cla	
Spyder Roadster	Debtor 1 only	Creditors Who Have Clair	
2014	Debtor 2 only	Current value of the	Current value of the
	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	☐ At least one of the debtors and another		
ation: 6926 Crescent Boat e, Canal Winchester OH	Check if this is community property (see instructions)	\$9,335.00	\$9,335.00
· Victorv	Who has an interest in the property? Check one	Do not deduct secured cla	
0	_		
	,		
oximate mileage: 67,000		entire property?	Current value of the portion you own?
r information:	☐ At least one of the debtors and another		
orcycle, Fair Condition, Not	_	\$700.00	\$700.00
unning condition. ation: 6926 Crescent Boat e, Canal Winchester OH 10	☐ Check if this is community property (see instructions)		\$700.00
: Chevrolet	Who has an interest in the property? Check one	Do not deduct secured cla	
el: Silverado	■ Debtor 1 only	Creditors Who Have Clair	
2019	,	Current value of the	Current value of the
oximate mileage: 16,700	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
r information:	☐ At least one of the debtors and another		
ation: 6926 Crescent Boat e, Canal Winchester OH	Check if this is community property (see instructions)	\$53,560.00	\$53,560.00
<u> </u>	Who has an interest in the property? Check one	Do not deduct secured cla	
	Debtor 1 only	Creditors Who Have Clair	
2011		Current value of the	Current value of the
oximate mileage: 83,725	,	entire property?	portion you own?
r information:	☐ At least one of the debtors and another		
, Good Condition ation: 6926 Crescent Boat e, Canal Winchester OH 10	Check if this is community property (see instructions)	\$10,846.00	\$10,846.00
e: Dodge	Who has an interest in the property? Check one	Do not deduct secured cla	
el: Charger	Debtor 1 only	Creditors Who Have Clair	
2019	Debtor 2 only	Current value of the	Current value of the
	Debtor 1 and Debtor 2 only	entire property?	portion you own?
oximate mileage: 17,000	· · · · · · · · · · · · · · · · · · ·		
oximate mileage: 17,000 r information: 7, 4 dr, Good Condition	At least one of the debtors and another		
	Canam Spyder Roadster 2014 Doximate mileage: 7,232 Trinformation: Dorcycle; Excellent Condition ation: 6926 Crescent Boat e, Canal Winchester OH Doximate mileage: 67,000 Trinformation: Dorcycle, Fair Condition, Not uning condition. Dorcycle, Fair Condition, Not uning condition. Dorcycle, Fair Condition, Not uning condition. Dorcycle, Fair Condition ation: 6926 Crescent Boat e, Canal Winchester OH Doximate mileage: 16,700 Trinformation: Dok, Excellent Condition ation: 6926 Crescent Boat e, Canal Winchester OH Doximate mileage: 83,725 Trinformation: Trin	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 and Debtor 2 only At least one of the debtors and another Decycle; Excellent Condition ation: 6926 Crescent Boat e, Canal Winchester OH Who has an interest in the property? Check one Debtor 1 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 9 on	Who has an interest in the property? Check one information: Victory

Official Form 106A/B Schedule A/B: Property

Case 2:21-bk-51758 Doc 1 Filed 05/19/21 Entered 05/19/21 14:55:24 Page 12 of 62 Document Debtor 1 Ralph Emanuel Anderson Case number (if known) Do not deduct secured claims or exemptions. Put Victory Who has an interest in the property? Check one 3.6 Make: the amount of any secured claims on Schedule D: Kingpin Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 7500 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another **Good Condition** \$5,580.00 \$5,580.00 ☐ Check if this is community property **Location: 6926 Crescent Boat** (see instructions) Lane, Canal Winchester OH 43110 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$135,792.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Stove \$200, Refrigerator \$400, Washer/Dryer \$300, Microwave \$25, Cooking Utensils \$10, Silverware/Flatware \$3, Cookware \$15, Living Room Furniture \$75, Dining Room Furniture \$50, Tables and Chairs \$25, Bedroom Furniture \$100, Dressers/Nightstands \$10,

Lamps and Accessories \$5, Desks/Office Furniture \$50, Carpenter Tools \$50, Mechanics Tools \$200, Guns and Firearms \$200, Lawnmower \$10, Yard Tools/Equipment \$15, Swimming Pool \$50 Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110

\$1,793.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

Television \$100, DVD Player \$10, DVDs \$5, CDs \$2, Other Stereo Equipment \$15, Computers \$50, Computer Printers \$20, Cell Phones \$100

Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110

\$302.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

	Case 2:21-b	k-51758			Entered 05/19/21 1 age 13 of 62	.4:55:24	Desc Main
Debtor 1	Ralph Emanu	ıel Anders			Case numbe	(if known)	
☐ Yes	s. Describe						
■ No		, shotguns, a	ammunition, ar	nd related equipment			
□ No		thes, furs, le	ather coats, d	esigner wear, shoes, ac	cessories		
		All Clothi Location:		cent Boat Lane, Cana	al Winchester OH 43110		\$100.00
□ No	Iry nples: Everyday jev s. Describe	welry, costum		gagement rings, wedding	g rings, heirloom jewelry, watche	s, gems, gold	, silver
				ent Boat Lane, Cana	al Winchester OH 43110		\$200.00
14. Any o ■ No	s. Describe other personal and s. Give specific info		l items you di	id not already list, inclu	uding any health aids you did	not list	
				Part 3, including any e	entries for pages you have att	ached	\$2,395.00
Part 4:	escribe Your Finance	ial Assets					
Do you o	own or have any le	gal or equit	able interest	in any of the following	?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	<i>mples:</i> Money you h	•	•	home, in a safe deposit	box, and on hand when you file	your petition	
Exar —	,	•		ccounts; certificates of dents with the same institut	eposit; shares in credit unions, t ion, list each.	orokerage hou	ses, and other similar
□ No ■ Yes	S			Institution name	e:		
_ 160	······································	17.1. Cl	hecking #54		Bank, 37 South High Stree OH 43110	t, Canal	\$380.91
		17.2. S a	avings #656		Bank, 37 South High Stree OH 43110	t, Canal	\$57.17

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D	ebtor 1	Ralph Emanuel Anderson	Case number (if known)	
18.		mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with brok	serage firms, money market accounts	
	■ No			
	☐ Yes	Institution or issuer na	ame:	
19.	joint v	ublicly traded stock and interests in incorporenture	rated and unincorporated businesses, including an interest i	n an LLC, partnership, and
	No			
	☐ Yes.	Give specific information about them Name of entity:	 % of ownership:	
20.	Negoti	ment and corporate bonds and other negoti able instruments include personal checks, cash egotiable instruments are those you cannot tran-	iers' checks, promissory notes, and money orders.	
	☐ Yes.	Give specific information about them Issuer name:		
21.	_Examp	nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 40	3(b), thrift savings accounts, or other pension or profit-sharing pl	ans
	■ No			
	☐ Yes.	List each account separately. Type of account:	Institution name:	
22.	Your s Examp		that you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications companie	es, or others
	■ No		Institution name or individual:	
	⊔ Yes.		institution name of individual.	
23.	Annuit	ies (A contract for a periodic payment of money	to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		s in an education IRA, in an account in a qua C. §§ 530(b)(1), 529A(b), and 529(b)(1).	alified ABLE program, or under a qualified state tuition prog	ram.
	No			
	☐ Yes	Institution name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts	equitable or future interests in property (oth	ner than anything listed in line 1), and rights or powers exerc	cisable for your benefit
		Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and oles: Internet domain names, websites, proceeds		
	☐ Yes.	Give specific information about them		
27.	_Examp	es, franchises, and other general intangibles oles: Building permits, exclusive licenses, coope	s erative association holdings, liquor licenses, professional licenses	3
	■ No □ Yes.	Give specific information about them		
M	onev or	property owed to you?		Current value of the
	,	,		portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	■ No			
	1 I V 65	Circa and additional formation and acceptable and the algorithm of	la atta an alma ant fil ant the a materima a land the a tarrers and	

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

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Debtor 1	Ralph Emanuel	l Anderson	Case number (if known)	
29. Family		np sum alimony, spousal support, child support, maint	enance, divorce settlement, property	settlement
■ No □ Yes.	Give specific information	ation		
Exam _i ■ No	benefits; unpaid	disability insurance payments, disability benefits, sick d loans you made to someone else	pay, vacation pay, workers' compe	nsation, Social Security
31. Interes	Give specific inform sts in insurance pol	icies		
<i>Exam</i> □ No	<i>ples:</i> Health, disabilit	y, or life insurance; health savings account (HSA); cre	edit, homeowner's, or renter's insurar	nce
■ Yes.	Name the insurance	company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		Fidelity Life Insurance Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110	Spouse	\$0.00
		State Farm, PO Box 88049, Atlanta, GA 30356-9901, Homeowners Policy #35-E5-R629-9	Lienholders: Fifth Third Bank and Huntington National Bank	\$0.00
			Dalik	
		State Farm, 1440 Granville Road, Newark, OH 43055, Policy #C308012-E09-35A; car insurance		\$0.00
		Progressive PO Box 31260, Tampa, FL 33631Motorcycle Insurance		\$0.00
If you somed	are the beneficiary o	hat is due you from someone who has died f a living trust, expect proceeds from a life insurance	policy, or are currently entitled to reco	eive property because
☐ Yes.	Give specific inform	nation		
		es, whether or not you have filed a lawsuit or mac loyment disputes, insurance claims, or rights to sue	le a demand for payment	
	Describe each clair	n		
■ No	contingent and unli	iquidated claims of every nature, including counte	erclaims of the debtor and rights to	set off claims
35. Any fi i ■ No	nancial assets you	did not already list		
	Give specific inform	nation		
		all of your entries from Part 4, including any entrie		\$438.08
Part 5: De	escribe Any Business-	Related Property You Own or Have an Interest In. List an	y real estate in Part 1.	

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Debtor 1 Ralph Emanuel Anderson Case number (if known)

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$163,200.00 56. Part 2: Total vehicles, line 5 \$135,792.00 57. Part 3: Total personal and household items, line 15 \$2,395.00 58. Part 4: Total financial assets, line 36 \$438.08 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$138,625.08

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

\$301,825.08

\$138,625.08

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Fill in this inform	nation to identify your	case:		
Debtor 1	Ralph Emanuel A	nderson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the	Property	You	Claim as	Exempt

Pa	rt 1: Identify the Property You Claim as E	xempt								
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.						
■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)										
	☐ You are claiming federal exemptions. 11 t	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.							
	6926 Crescent Boat Lane Canal Winchester, OH 43110 Franklin	\$163,200.00		\$43,946.17	Ohio Rev. Code Ann. § 2329.66(A)(1)					
	County 1500 sq. ft ranch, finished basement, 4 BR, 3 BA Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(1)					
	2014 Canam Spyder Roadster 7,232	\$9,335.00		\$623.15	Ohio Rev. Code Ann. §					
miles Motorcycle; Excellent Condition Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110 Line from Schedule A/B: 3.1				100% of fair market value, up to any applicable statutory limit	2329.66(A)(18)					

\$700.00

2010 Victory Crosscountry 67,000

Motorcycle, Fair Condition, Not in

Location: 6926 Crescent Boat Lane, **Canal Winchester OH 43110** Line from Schedule A/B: 3.2

running condition.

Ohio Rev. Code Ann. §

2329.66(A)(18)

\$700.00

100% of fair market value, up to

any applicable statutory limit

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Debto	Ralph Emanuel Anderson			Case number (if known)	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	011 Jeep Grand Cherokee Limited 3,725 miles	\$10,846.00		\$1,056.84	Ohio Rev. Code Ann. § 2329.66(A)(2)
4 L C	dr, Good Condition ocation: 6926 Crescent Boat Lane, anal Winchester OH 43110 ne from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	,
S	tove \$200, Refrigerator \$400, /asher/Dryer \$300, Microwave \$25,	\$1,793.00		\$1,793.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
C S S D aı \$	cooking Utensils \$10, ilverware/Flatware \$3, Cookware 15, Living Room Furniture \$75, ining Room Furniture \$50, Tables nd Chairs \$25, Bedroom Furniture 100, Dressers/Nightstands \$10, amp ne from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(4)(a)
	elevision \$100, DVD Player \$10, VDs \$5, CDs \$2, Other Stereo	\$302.00		\$302.00	Ohio Rev. Code Ann. §
E C \$	quipment \$15, Computers \$50, computer Printers \$20, Cell Phones 100			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)
С	ocation: 6926 Crescent Boat Lane, ranal Winchester OH 43110 ne from Schedule A/B: 7.1				
	II Clothing \$100 ocation: 6926 Crescent Boat Lane,	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
C	anal Winchester OH 43110 ne from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	(// //
	/edding Ring ocation: 6926 Crescent Boat Lane,	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
_	ranal Winchester OH 43110 ne from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	hecking #5453: Huntington Bank, 7 South High Street, Canal	\$380.91		\$380.91	Ohio Rev. Code Ann. § 2329.66(A)(3)
W	/inchester, OH 43110 ne from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
S	avings #6564: Huntington Bank, 37 outh High Street, Canal Winchester,	\$57.17	•	\$57.17	Ohio Rev. Code Ann. § 2329.66(A)(3)
	PH 43110 ne from <i>Schedule A/B</i> : 17.2			100% of fair market value, up to any applicable statutory limit	
		3 years after that for ca	ises fi		
	□ No □ Vas				

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		Document Page	19 of 62		
Fill in this i	nformation to identify yo	ur case:			
Debtor 1	Ralph Emanue	l Anderson			
	First Name	Middle Name Last Name)	-	
Debtor 2		Mill N		-	
(Spouse if, filing	g) First Name	Middle Name Last Name			
United State	es Bankruptcy Court for the	SOUTHERN DISTRICT OF OHIO		_	
Case numb	er				
(if known)				☐ Check	if this is an
				amend	ded filing
Official E	Form 106D				
	Form 106D				
Schedu	ale D: Creditors	s Who Have Claims Secur	red by Propert	У	12/15
	py the Additional Page, fill it	If two married people are filing together, both arout, number the entries, and attach it to this form			
1. Do any cre	ditors have claims secured b	by your property?			
☐ No. (Check this box and submit	this form to the court with your other schedules	s. You have nothing else	to report on this form.	
Yes.	Fill in all of the information	below.			
Part 1:	ist All Secured Claims				
		more than one secured claim, list the creditor separa	Column A	Column B	Column C
for each claim	n. If more than one creditor ha	is a particular claim, list the other creditors in Part 2. a tical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
ソ11	ens One Consumer		¢54.267.00	¢55 771 00	\$0.00
Loan Creditor	Servicing	Describe the property that secures the claim:	\$54,367.09	\$55,771.00	\$0.00
Creditor	sivame	2019 Dodge Charger 17,000 miles SRT, 4 dr, Good Condition			
		Location: 6926 Crescent Boat Lane,			
PO B	ox 42033	Canal Winchester OH 43110			
_	dence, RI	As of the date you file, the claim is: Check all tha	t		
	0-2033	apply. ☐ Contingent			
Number	, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes t	he debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 o	•	An agreement you made (such as mortgage o	r secured		
Debtor 2 o	•	car loan)			
_	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	1)		
_	ne of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if to	this claim relates to a lity debt	☐ Other (including a right to offset)			
Date debt wa	as incurred 12/20/2019	Last 4 digits of account number 778	33		

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Debtor 1 Ralph Emanuel Anders	Case number (if known)					
First Name Middle N	lame Last Name					
2.2 Fifth Third Bank	Describe the property that secures the claim:	\$94,988.75	\$163,200.00	\$0.00		
Creditor's Name	6926 Crescent Boat Lane Canal Winchester, OH 43110 Franklin County 1500 sq. ft ranch, finished					
PO Box 630412	basement, 4 BR, 3 BA As of the date you file, the claim is: Check all that					
Cincinnati, OH 45263-0412	apply. Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)					
Date debt was incurred 12/30/2002	Last 4 digits of account number 2052		\$40.946.00	\$0.00		
2.3 Firth Third Bank, NA Creditor's Name	Describe the property that secures the claim: 2011 Jeep Grand Cherokee Limited	\$9,789.16	\$10,846.00	\$0.00		
o.canor o .tamo	83,725 miles					
	4 dr, Good Condition					
	Location: 6926 Crescent Boat Lane,					
	Canal Winchester OH 43110					
PO Box 674	As of the date you file, the claim is: Check all that apply.					
Wilmington, OH 45177	Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	■ An agreement you made (such as mortgage or	secured				
Debtor 2 only	car loan)					
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	Other (including a right to offset)					
Date debt was incurred 12/09/2020	Last 4 digits of account number 6500	6				

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Debtor 1 Ralph	Emanuel Anders	on	Case number (if known)		
First Nam	e Middle N	Jame Last Name			
2.4 Huntington	n National	Describe the property that secures the claim:	\$24,265.08	\$163,200.00	\$0.00
PO Box 18 Columbus 43218-238	, OH	6926 Crescent Boat Lane Canal Winchester, OH 43110 Franklin County 1500 sq. ft ranch, finished basement, 4 BR, 3 BA As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated			
Who owes the del	ot? Check one.	Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or se car loan)	cured		
☐ Debtor 1 and Del		☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of th	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla		☐ Other (including a right to offset)			
Date debt was incu	rred <u>2017</u>	Last 4 digits of account number 8114			
2.5 Park Natio		Describe the property that secures the claim:	\$8,711.85	\$9,335.00	\$0.00
	ain Street non, OH 43050 City, State & Zip Code	2014 Canam Spyder Roadster 7,232 miles Motorcycle; Excellent Condition Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only		An agreement you made (such as mortgage or se	cured		
Debtor 2 only		car loan)			
Debtor 1 and Del	•	Statutory lien (such as tax lien, mechanic's lien)			
	e debtors and another	Judgment lien from a lawsuit			
Check if this cla		☐ Other (including a right to offset)			
Date debt was incu	rred 05/24/2019	Last 4 digits of account number 2381			

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Debtor 1 Ralph Emanuel Anders	Case number (if known)					
First Name Middle N	Jame Last Name	-				
2.6 Performance Finance	Describe the property that secures the claim:	\$3,518.61	\$5,580.00	\$0.00		
Creditor's Name 10509 Professional Circle, Suite 100 Reno, NV 89521	2012 Victory Kingpin 7500 miles Good Condition Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110 As of the date you file, the claim is: Check all that apply. Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another □ Check if this claim relates to a community debt	 ■ An agreement you made (such as mortgage or car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) 					
Date debt was incurred 06/24/2019	Last 4 digits of account number 234	2				
2.7 Wright Patt Credit Union Creditor's Name	Describe the property that secures the claim: 2019 Chevrolet Silverado 16,700 miles Truck, Excellent Condition Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110	<u>\$55,570.05</u>	\$53,560.00	\$2,010.05		
PO Box 886 Wilmington, OH 45177	As of the date you file, the claim is: Check all that apply. Contingent	7				
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien))				
☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
Add the dollar value of your entries in C If this is the last page of your form, add	Column A on this page. Write that number here:	\$251,210.5				
Write that number here:	ino donar value totalo nom an payes.	\$251,210.5	9			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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				ocument	Page 23	3 of 62		
Fill in th	nis informa	tion to identify your	case:					
Debtor 1	1	Ralph Emanuel A	nderson					
		First Name	Middle Na	me	Last Name			
Debtor 2 (Spouse if		First Name	Middle Na	me	Last Name			
United S	States Bank	ruptcy Court for the:	SOUTHERN	DISTRICT OF (JHIO			
Case nu (if known)	ımber			-			_	heck if this is an mended filing
Sche		: Creditors W				Don't 2 few arealites a with NN	ONDDIODITY alsi	12/15
any exect Schedule Schedule left. Attac name and	utory contractions G: Executors D: Creditors The Continuous case numb	cts or unexpired leases ry Contracts and Unexpi s Who Have Claims Sectionation Page to this pager (if known).	that could resu ired Leases (Ofi ured by Propert e. If you have n	It in a claim. Also ficial Form 106G). y. If more space i o information to r	o list executory of . Do not include s needed, copy	Part 2 for creditors with No contracts on Schedule A/E any creditors with partiall the Part you need, fill it ou do not file that Part. On th	B: Property (Officions) B: Pro	al Form 106A/B) and on that are listed in tries in the boxes on the
Part 1:		of Your PRIORITY Un have priority unsecured						
_	lo. Go to Pari		a ciaiilis ayailis	t you !				
- \		1 2.						
	es.							
Part 2:	List All	of Your NONPRIORIT	Y Unsecured	Claims				
3. Do a	ny creditors	have nonpriority unsec	ured claims aga	ainst you?				
	lo. You have	nothing to report in this pa	art. Submit this fo	orm to the court wi	th your other sche	edules.		
■ Y	'es.							
unse	ecured claim, one creditor	list the creditor separately	for each claim.	For each claim list	ed, identify what t	b holds each claim. If a cre type of claim it is. Do not list three nonpriority unsecured	claims already inc	luded in Part 1. If more
								Total claim
4.1	City of Co	olumbus - Public U	tilities	Last 4 digits of a	ccount number	7150		Unknown
	Nonpriority C 910 Dubli	reditor's Name		When was the de	ht incurred?	02/08/2021		
		s, OH 43215-1169		Wileii was tile ac	bt incurred.	02/00/2021		-
		et City State Zip Code		As of the date yo	u file, the claim i	is: Check all that apply		
	_	ed the debt? Check one.		_				
	Debtor 1	•		☐ Contingent				
	Debtor 2	-		Unliquidated				
		and Debtor 2 only		Disputed	ODITY uncesure	d alaim.		
	_	ne of the debtors and and	MICI	Type of NONPRIC Student loans	וואכ unsecured	u Cialifi:		
	debt	this claim is for a comm subject to offset?	nunity			aration agreement or divorce	that you did not	
	■ No					g plans, and other similar d	ebts	
	☐ Yes			Other. Specify	•			
				— Guier, Specify				_

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Home Depot	Last 4 digits of account number	XXXX	\$1,268.50		
Nonpriority Creditor's Name PO Box 9001010 Louisville, KY 40290-1010	When was the debt incurred?	02/2021			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts			
Yes	Other. Specify Credit Card				
Licking Memorial Hospital	Last 4 digits of account number	9800	\$768.76		
Nonpriority Creditor's Name 1320 West Main Street Newark, OH 43055	When was the debt incurred?	05/11/2019			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	_				
Debtor 1 only	Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed	alain.			
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	ciaim:			
☐ Check if this claim is for a community	☐ Obligations arising out of a separa	ation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No □ Yes	☐ Debts to pension or profit-sharing ☐ Other. Specify Medical	pians, and other similar debts			
ш теs	Other. Specify				
Mount Carmel East Nonpriority Creditor's Name	Last 4 digits of account number	1025	\$1,499.27		
Nonpriority Creditor's Name 417 Bridge Street Danville, VA 24541-1403	When was the debt incurred?	01/24/2021			
Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:			
Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not			
No	Debts to pension or profit-sharing	plans, and other similar debts			
		Figure 5 and			
Yes	Other. Specify Medical				

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Mount Carmel Health Providers Nonpriority Creditor's Name	Last 4 digits of account number		\$125.66
Dr. Essa Essa 85 McNaughten Road, Unite 130 Columbus, OH 43213	When was the debt incurred?	01/24/2021	
Number Street City State Zip Code	As of the date you file, the claim is		
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Polaris Surgery Center	Last 4 digits of account number	9581	\$5,434.26
Nonpriority Creditor's Name 300 Polaris Parkway, Suite 1400 Westerville, OH 43082-7990	When was the debt incurred?	10/31/2019	
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepail report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Medical		
Progressive Motorcycle Insurance	Last 4 digits of account number		\$917.00
Nonpriority Creditor's Name PO Box 31260	When was the debt incurred?		
Tampa, FL 33631 Number Street City State Zip Code	As of the date you file, the claim is	Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is	S. Oneck all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes			

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1 Ralph Emanuel Anderson		Case number (if known)	
South Central Power Co.	Last 4 digits of account number	5124	\$142.00
Nonpriority Creditor's Name	_		
2780 Coonpath Road	When was the debt incurred?	2001	
Lancaster, OH 43130			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

■ Other. Specify Electric Bill

Part 4: Add the Amounts for Each Type of Unsecured Claim

☐ Yes

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 10,155.45
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 10,155.45

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Fill in this information to identify your case:						
Debtor 1	Ralph Emanuel A	nderson				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

- 1	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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Fill in t	his information to identify your	case:		
Debtor	1 Ralph Emanuel A	Inderson		
5.1.	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if		Middle Name	Last Name	
United S	States Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
0				
Case nu (if known)				☐ Check if this is an
				amended filing
Offici	ial Form 106H			
	edule H: Your Cod	ebtors		12/15
00110	daio III Tour oca	<u> </u>		1213
fill it out your na		boxes on the left. Attach . Answer every question	the Additional Page to this	f more space is needed, copy the Additional Page, spage. On the top of any Additional Pages, write codebtor.
	No			
	Yes			
2 V	Nithin the last 8 years, have you	Llived in a community or	onarty state or territory? (C	Community property states and territories include
	zona, California, Idaho, Louisiana,			
	de Oe te Per O			
_	No. Go to line 3. Yes. Did your spouse, former spo	use or legal equivalent live	with you at the time?	
_	roo. Dia your opoaco, roimor opo.	soo, or logal equivalent live	, war you at the time.	
in I For	ine 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make sure	ur spouse is filing with you. List the person shown you have listed the creditor on Schedule D (Official Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:
3.1	Donna Anderson 6926 Crescent Boat Lane			Schedule D, line
	Canal Winchester, OH 43	110		☐ Schedule E/F, line
	, , , , , , , , , , , , , , , , , , , ,			□ Schedule G Fifth Third Bank
			<u> </u>	Titli Tillia Balik
3.2	Donna Anderson		I	Schedule D, line2.4
	6926 Crescent Boat Lane Canal Winchester, OH 437	110	[☐ Schedule E/F, line
	Canal Willenester, On 43	110		☐ Schedule G
			ŀ	Huntington National Bank
3.3	Tyler Anderson		I	Schedule D, line 2.1
	6926 Crescent Boat Lane	110	[☐ Schedule E/F, line
	Canal Winchester, OH 43	110		Schedule G
			(Citizens One Consumer Loan Servicing

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Debtor 1	Ralph Emanuel Anderson	Case number (if known)
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Tyler Anderson 6926 Cresent Boat Lane Canal Winchester, OH 43110	■ Schedule D, line □ Schedule E/F, line □ Schedule G Performance Finance

Fill in this informa	ation to identify your case:	
Debtor 1	Ralph Emanuel Anderson	
Debtor 2 (Spouse, if filing)		
United States Ba	nkruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106l	MM / DD/ YYYY
Schedule	e I: Your Income	12/15
•	and accurate as possible. If two married people are filing together at information. If you are married and not filing jointly, and your sp	•

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment					
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse		
	If you have more than one job,	Employment status	■ Employed	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed	Not employed		
	employers.	Occupation	Heavy Equipment Operator			
	Include part-time, seasonal, or self-employed work.	Employer's name	George J. Igel & Co., Inc.			
	Occupation may include student or homemaker, if it applies.	Employer's address	2040 Alum Creek Drive Columbus, OH 43207			
		How long employed the	nere? 3 Years			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

4. **Calculate gross Income.** Add line 2 + line 3.

			non-fili	ng spouse
2.	\$	5,887.57	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$_	5,887.57	\$	0.00

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Ralph Emanuel Anderson	-	(Case	number (if known)				
					For	Debtor 1		or Debtor on-filing s		
	Cop	by line 4 here	4.		\$	5,887.57	\$		0.00	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	1,361.53	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	С.	\$	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		0.00	_
	5e.	Insurance	56		\$	0.00	\$		0.00	_
	5f.	Domestic support obligations	5f		\$	0.00	\$		0.00	_
	5g.	Union dues	50	-	\$_	229.71	\$		0.00	_
	5h.	Other deductions. Specify:	_	Դ.+	\$_	0.00	+ \$		0.00	-
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,591.24	\$		0.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,296.33	\$		0.00	=
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	01	monthly net income.	88		\$_	0.00	\$		0.00	_
	8b.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8t	٥.	\$_	0.00	\$		0.00	-
	8c.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	•	\$	0.00	\$		0.00	
	8d.		80		\$ -	0.00	\$		0.00	_
	8e.	Social Security	86		\$_	0.00	\$		273.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$	0.00	\$		0.00	_
	8g.	Pension or retirement income	80	-	\$_	0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8r	Դ.+	\$	0.00	+ \$		0.00	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. 9	\$	0.00	\$		273.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,296.33 + \$		273.00	= \$	4,569.33
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				1,200.00		270.00		4,000.00
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep				•	Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies							\$	4,569.33
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combi	ned y income
		No.								

Official Form 106l Schedule I: Your Income page 2

EHII-	in this i nforms	tion to identify	our ogge							
FIII	in this informa	tion to identify yo	our case:							
Deb	Tor 1 Ralph Emanuel Anderson					Check if this is:				
								n amended filing		
l	tor 2	-							ving postpetition char	oter
(Spo	ouse, if filing)						1	3 expenses as of t	the following date:	
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO							MM / DD / YYYY			
	e numbe r nown)									
Of	fficial Fo	rm 106J								
S	chadula	J: Your	Evnor	1606						12/15
Ве	as complete	and accurate as	possible	. If two married people a						
		ore space is ne n). Answer ever		ch another sheet to this n.	s form. On the top of	any add	itior	nal pages, write y	our name and case	
Par	t 1: Descr	ibe Your House	hold							
1.	Is this a joir		.iioiu							
	■ No. Go to									
			in a canar	ate household?						
			iii a sepai	ate nousenoid?						
		-								
	ЦΥ	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expense	s for Separate House	nola of D	ebto	or 2.		
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?	
	D	41							□ No	
	Do not state dependents				Wife			63 Years	■ Yes	
	шорошос						—		□ No	
									□ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
3.		enses include		No	-				— 103	
		f people other t d your depende		Yes						
Par	t 2: Estim	ate Your Ongoi	ng Month	ly Expenses						
exp				uptcy filing date unless y is filed. If this is a sup						
Inc	luda avnanca	s paid for with	non-cash	government assistance	if you know					
				cluded it on Schedule I:						
	ficial Form 10							Your expe	enses	
4.	The rental or home ownership expenses for your residence. Include first mortgapayments and any rent for the ground or lot.				Include first mortgage		\$		1,333.04	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's	s. or renter	's insurance		4a. 4b.			0.00	
	•	•		pkeep expenses			\$		100.00	
		owner's associat				4d.			7.50	
5.	Additional r	nortgage paymo	ents for yo	our residence , such as h	ome equity loans		\$		0.00	

Debtor 1	Ralph Emanuel Anderson	Case num	ber (if known)					
6. Utilitie	es:							
	Electricity, heat, natural gas	6a.	\$	250.00				
	Water, sewer, garbage collection	6b.	\$	75.00				
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	160.00				
	Other. Specify:	6d.	\$	0.00				
	and housekeeping supplies		\$	600.00				
	care and children's education costs	8.	\$	0.00				
	ing, laundry, and dry cleaning	9.	\$	200.00				
	nal care products and services	10.	\$	40.00				
	al and dental expenses	11.		300.00				
	portation. Include gas, maintenance, bus or train fare.		Ψ	300.00				
	t include car payments.	12.	\$	200.00				
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00				
	table contributions and religious donations	14.	\$	25.00				
5. Insura	•			20.00				
	t include insurance deducted from your pay or included in lines 4 or 20.							
	Life insurance	15a.	\$	79.00				
15b.	Health insurance	15b.	\$	0.00				
15c.	Vehicle insurance	15c.	·	643.00				
15d.	Other insurance. Specify:	15d.	·	0.00				
	5. Do not include taxes deducted from your pay or included in lines 4 or 20.		*	0.00				
Specif		16.	\$	0.00				
	Iment or lease payments:		· -					
	Car payments for Vehicle 1	17a.	\$	290.00				
17b.	Car payments for Vehicle 2	17b.	\$	199.00				
17c.	Other. Specify:	17c.	\$	0.00				
	Other. Specify:	17d.	\$	0.00				
	payments of alimony, maintenance, and support that you did not report a		<u> </u>					
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00				
	payments you make to support others who do not live with you.		\$	0.00				
Specif	' y:	19.						
0. Other	real property expenses not included in lines 4 or 5 of this form or on Sci	hedule I: Yo	ur Income.					
20a.	Mortgages on other property	20a.	\$	0.00				
20b.	Real estate taxes	20b.	\$	0.00				
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00				
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00				
20e.	Homeowner's association or condominium dues	20e.	\$	0.00				
1. Other	: Specify: Union Dues not deducted from salary	21.	+\$	22.75				
			·					
	late your monthly expenses							
	add lines 4 through 21.		\$	4,564.29				
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$					
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	4,564.29				
a Calon	late your monthly net income.							
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4 EEO 22				
	Copy your monthly expenses from line 22c above.	23a. 23b.		4,569.33 4,564.29				
∠30.	Copy your monthly expenses normine 220 above.	230.	-φ	4,364.29				
23c	Subtract your monthly expenses from your monthly income.							
	The result is your <i>monthly net income</i> .	23c.	\$	5.04				
	,							
	u expect an increase or decrease in your expenses within the year after							
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a							
_	ation to the terms of your mortgage?							
■ No								
☐ Ye	s. Explain here:							

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Fill in this info	rmation to identify your	case:			
Debtor 1	Ralph Emanuel A				
Debter 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	SOUTHERN DISTRIC	T OF OHIO		
Case number					
(if known)					☐ Check if this is an
					amended filing
You must file th obtaining mone	nis form whenever you fi	le bankruptcy schedule connection with a bar		s. Making a false state	ment, concealing property, or), or imprisonment for up to 20
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sur	mmary and schedules file	ed with this declaration	n and
X /s/ Ra	lph Emanuel Anderso	n	X		
	Emanuel Anderson		Signature o	f Debtor 2	
Signati	ure of Debtor 1				
Date	May 19, 2021		Date		

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Fill i	n this inform	nation to identify you	r case:							
Debtor 1		Ralph Emanuel								
Debt	tor 2	First Name	Middle Name	Last Name						
	se if, filing)	First Name	Middle Name	Last Name						
Unite	ed States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO						
Case	e number									
(if kno	wn)				_	Check if this is an mended filing				
						•				
Off	icial Fo	rm 107								
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19				
					equally responsible for sup					
		ore space is needed, n). Answer every que	•	this form. On the top of any	vadditional pages, write you	ır name and case				
		,		Lived Defens						
Part			rital Status and Where You	Lived Before						
1. '	what is your	t is your current marital status?								
	■ Married□ Not mar	ried								
2. I	During the la	Ouring the last 3 years, have you lived anywhere other than where you live now?								
	■ No	No.								
İ	■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. \	Within the la	st 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commun	ity property state or territory	? (Community property				
					co, Texas, Washington and W					
ı	■ No									
I	☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (O	ficial Form 106H).						
Part	2 Explai	n the Sources of You	r Income							
ı	Fill in the tota	l amount of income yo	nployment or from operating user in the propertion of the propertion of the properties and a second contract of the properties of the prop	all businesses, including part-		ndar years?				
	□ No									
Ī	_	in the details.								
			Dalifar 4		Dalifa a O					
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$17,686.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Deptor 1 Ra	alph Emanuel Ande	erson	Cas	e number (if known)				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
For last caler (January 1 to	ndar year: December 31, 2020)	■ Wages, commissions, bonuses, tips	\$86,311.00	☐ Wages, commissions bonuses, tips	,			
		☐ Operating a business		☐ Operating a business				
	dar year before that: December 31, 2019	■ Wages, commissions, bonuses, tips	\$79,133.00	☐ Wages, commissions bonuses, tips	,			
		☐ Operating a business		☐ Operating a business				
□ No	source and the gross i	ncome from each source separa Debtor 1	tely. Do not include income t	hat you listed in line 4. Debtor 2				
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)			
	y 1 of current year ur filed for bankruptcy:	ntil	\$0.00	Social Security Benefits	\$1,092.0			
	dar year before that: December 31, 2019	Pension	\$10,845.00					
Part 3: Lis	t Certain Payments Y	ou Made Before You Filed for	Bankruptcy					
6. Are eithe □ No.	Neither Debtor 1 no	or 2's debts primarily consume or Debtor 2 has primarily consu or a personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U.S.C. §	101(8) as "incurred by ar			
	During the 90 days b	pefore you filed for bankruptcy, di	id you pay any creditor a tota	I of \$6,825* or more?				
	☐ Yes List belo	ow each creditor to whom you pai t creditor. Do not include paymer	nts for domestic support oblig	, ,	,			
		ide payments to an attorney for the nent on 4/01/22 and every 3 year		or after the date of adjustm	ent.			
■ Yes.	Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?							
	No. Go to lin	ne 7.						
	include	we each creditor to whom you pai payments for domestic support o for this bankruptcy case.						
Creditor	's Name and Address	Dates of payme	ent Total amount	Amount you Was th	is payment for			

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Case number (if known)

7.	Within 1 year before you filed for banks Insiders include your relatives; any general of which you are an officer, director, personal business you operate as a sole propriet alimony.	al partnon	ers; relatives of any gene ntrol, or owner of 20% or	eral partners; partners more of their voting	erships of wh g securities;	hich you and any	are a genera managing a	al partner; corpo gent, including	
	No								
	☐ Yes. List all payments to an insider.								
	Insider's Name and Address		Dates of payment	Total amount paid	Amount still	you owe	Reason for	this payment	
В.	Within 1 year before you filed for banks insider? Include payments on debts guaranteed or	• •	, ,,,	ments or transfer a	any propert	y on ac	count of a d	ebt that benefi	ted an
	■ No□ Yes. List all payments to an insider								
	Insider's Name and Address		Dates of payment	Total amount paid	Amount still	you owe	Reason for Include cred	this payment itor's name	
Par	rt 4: Identify Legal Actions, Reposses	eione	and Foroclosures						
rai	it 4. Identity Legal Actions, Reposses	5510115,	and Foreciosures						
9.	Within 1 year before you filed for banks List all such matters, including personal in modifications, and contract disputes.								
	■ No □ Yes. Fill in the details.								
	Case title Case number	N	lature of the case	Court or agency			Status of th	e case	
10.	Within 1 year before you filed for banks Check all that apply and fill in the details b		was any of your prope	rty repossessed, f	oreclosed,	garnish	ed, attached	I, seized, or le	vied?
	No. Go to line 11.Yes. Fill in the information below.								
	Creditor Name and Address	C	Describe the Property	Date				Value pro	of the operty
		E	Explain what happened						
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No								
	Yes. Fill in the details.								
	Creditor Name and Address		Describe the action the	creditor took		Date a taken	ction was	Aı	mount
12.	Within 1 year before you filed for banks court-appointed receiver, a custodian,			rty in the possess	ion of an as	ssignee	for the bene	fit of creditors	s, a
	■ No □ Yes								
Pai	rt 5: List Certain Gifts and Contribution	ons							
13.	Within 2 years before you filed for bank No	kruptcy	, did you give any gifts	with a total value	of more tha	an \$600	per person	?	
	☐ Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$ per person	600	Describe the gifts Dath				you gave ts		Value
	Person to Whom You Gave the Gift an Address:	d							

Debtor 1 Ralph Emanuel Anderson

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14.	 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. 										
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value					
Par	t 6: List Certain Losses										
15.	Within 1 year before you filed for bankrupto or gambling?	y or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster					
	■ No □ Yes. Fill in the details.										
	how the loss occurred Inc	ist pending Property.	Date of your loss	Value of property lost							
Par	t 7: List Certain Payments or Transfers										
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.										
	□ No■ Yes. Fill in the details.										
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment					
	The Gerth Law Office 465 Waterbury Court Suite A Columbus, OH 43230 philipgerth@gerthlaw.com		Cash		04/19/2021	\$1,062.00					
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.										
	■ No □ Yes. Fill in the details.										
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread	usin ade a	ess or financial affairs? as security (such as the granting of a se								
	■ No □ Yes. Fill in the details.										
	Person Who Received Transfer Address		Description and value of property transferred	any property or received or debts change	Date transfer was made						

Debtor 1 Ralph Emanuel Anderson

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Debtor 1 Ralph Emanuel Anderson

Case number (if known)

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protein No		ny property to a	self-settle	d trust or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Pa	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposi	t Boxes, and St	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or or	•				
	houses, pension funds, cooperatives, associa No				,	, 0
	Yes. Fill in the details.		T		D-1	Lasthalasa
		ast 4 digits of ccount number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed fo	r bankruptcy, a	ny safe dep	posit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than you	r home within 1	year befor	e you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Control for	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any proper	ty you bor	rowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Pai	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surfac	e water, ground			
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	s defined under any		law, wheth	er you now own, operate	, or utilize it or used
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		as a hazardous	s waste, ha	zardous substance, toxic	substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Ralph Emanuel Anderson

Case number (if known)

24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or in violation of an environmer	ntal law?						
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of ar	ny release of hazardous material?								
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders										
	■ No □ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Par	11: Give Details About Your Business or Co	onnections to Any Business								
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?									
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	☐ An officer, director, or managing exec	utive of a corporation								
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation								
	■ No. None of the above applies. Go to Par	rt 12.								
	Yes. Check all that apply above and fill in	the details below for each business	5.							
	Business Name Daddress	Describe the nature of the business	Employer Identification number Do not include Social Security n	umbor or ITIN						
	1.1	Name of accountant or bookkeeper	Dates business existed	umber of friit.						
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statement	to anyone about your business? Includ	de all financial						
	■ No □ Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued								

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Debtor	1 Ralph Emanuel Anderson		Case number (if known)
Part 12	Sign Below		
are true with a b		ing a false statement, concealing p	ments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection r up to 20 years, or both.
/s/ Ra	lph Emanuel Anderson		
•	Emanuel Anderson ure of Debtor 1	Signature of Debtor	• 2
Date	May 19, 2021	Date	
Did you ■ No □ Yes	attach additional pages to Your Sta	ntement of Financial Affairs for Ind	lividuals Filing for Bankruptcy (Official Form 107)?
Did you	ı pay or agree to pay someone who i	s not an attorney to help you fill o	ut bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In re	Ralph Emanuel Anderson		Case No.						
		Debtor(s)	Chapter	7					
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DE	EBTOR(S)					
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	to me, for services r					
	For legal services, I have agreed to accept			1,062.00					
	Prior to the filing of this statement I have received		\$	1,062.00					
	Balance Due			0.00					
2. 7	The source of the compensation paid to me was:								
	■ Debtor □ Other (specify):								
3. Т	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	bers and associates of	of my law firm.				
I	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the nar				law firm. A				
5. 1	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	a. Representation of the debtor in adversary proceeding o. [Other provisions as needed] Negotiations with secured creditors to r reaffirmation agreements that do not red	educe to market value; ex		preparation and	filing of				
б. І	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding, prepar- of liens on household goods; garnishme	schargeability actions, judi ation and filing of motions	cial lien avoidance pursuant to 11 US	SC 522(f)(2)(A) fo	r avoidance				
		CERTIFICATION							
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the	debtor(s) in				
М	ay 19, 2021	/s/ Philip W. Gert	h, Esq.						
D_{ℓ}	ate	Philip W. Gerth, I Signature of Attorne							
		The Gerth Law O							
		465 Waterbury C	ourt						
		Gahanna, OH 432 614-856-9399 Fa							
		philipgerth@gert							
		Name of law firm							

Fill in	this information to identify your case:					irected in	this form and in	Form
Debte	Palph Emanuel Anderson		12	2A-1Sup	0:			
Debte (Spous	or 2 ee, if filing)			□ 1. The	ere is no pres	umption o	of abuse	
Unite	d States Bankruptcy Court for the: Southern District of	f Ohio	_	ар		nade unde	ne if a presump er <i>Chapter 7 Me</i>	
Case (if know	numberwn)		_	☐ 3. The	Means Test	does not	apply now beca	
	_				k if this is a		• • • • • • • • • • • • • • • • • • • •	,
Offi	cial Form 122A - 1						9	
	apter 7 Statement of Your Cur	rent Mor	nthly Inc	ome				04/20
attach case n	complete and accurate as possible. If two married people a a separate sheet to this form. Include the line number to w number (if known). If you believe that you are exempted fror ying military service, complete and file Statement of Exempt: Calculate Your Current Monthly Income	hich the addition m a presumption	nal information a of abuse becau	applies. O se you do	n the top of a	ny additior	nal pages, write y sumer debts or b	your name and because of
1.	What is your marital and filing status? Check one on	ıly.						
	☐ Not married. Fill out Column A, lines 2-11.							
	☐ Married and your spouse is filing with you. Fill ou	it both Columns	A and B, lines	2-11.				
	■ Married and your spouse is NOT filing with you.	You and your s	pouse are:					
	■ Living in the same household and are not lega	lly separated. F	Fill out both Co	lumns A	and B, lines 2	2-11.		
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	egally separated	l under nonbar	kruptcy I	aw that appli	es or that		
10° the	I in the average monthly income that you received from all 1 1(10A). For example, if you are filing on September 15, the 6-m 6 6 months, add the income for all 6 months and divide the total buses own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 thro sult. Do not inclu-	ugh Augus de any inc	t 31. If the amo	ount of your ore than or	r monthly income nce. For example,	varied during if both
				Column Debtor		Column Debtor non-fili		
	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commissio	ons (before all	\$	5,887.60	\$	0.00	
	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
,	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regular I, your depender	contributions nts, parents,	\$	0.00	\$	0.00	
	Net income from operating a business, profession,	or farm						
			tor 1					
	Gross receipts (before all deductions)	\$ 0.00						
	Ordinary and necessary operating expenses	-\$ 0.00	Cany have	¢.	0.00	œ	0.00	
	Net monthly income from a business, profession, or farm	n\$	Copy here ->	Ф	0.00	\$	0.00	
6.	Net income from rental and other real property	Deb	tor 1					
	Gross receipts (before all deductions)	\$ 0.00						
	Ordinary and necessary operating expenses	-\$ 0.00						
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00	
7	Interest dividends and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

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Case number (if known)

				lumn A btor 1		Column B Debtor 2	or	
8. Unemployment compensation			\$		0.00	\$	0.00	
Do not enter the amount if you ce the Social Security Act. Instead,		ed was a benefit ur	nder					
For you	\$	0.00						
For your spouse		0.00						
9. Pension or retirement income, benefit under the Social Security not include any compensation, p United States Government in coldisability, or death of a member pay paid under chapter 61 of title does not exceed the amount of rif retired under any provision of the security of the	Act. Also, except as stated in ension, pay, annuity, or allowannection with a disability, combot the uniformed services. If you too the include that pay only etired pay to which you would	the next sentence ance paid by the bat-related injury or ou received any ret y to the extent that otherwise be entitl	r ired it		0.00	\$	0.00	
10. Income from all other sources Do not include any benefits rece under the Federal law relating to under the National Emergencies coronavirus disease 2019 (COV crime, a crime against humanity, compensation pension, pay, and Government in connection with a death of a member of the uniforr separate page and put the total la	ived under the Social Security the national emergency declar Act (50 U.S.C. 1601 et seq.) of D-19); payments received as or international or domestic to builty, or allowance paid by the disability, combat-related injuried services. If necessary, list	r Act; payments ma ared by the Preside with respect to the a victim of a war errorism; or to United States ury or disability, or	de nt				_	
·			\$_		0.00	\$	0.00	
			\$_		0.00	\$	0.00	
Total amounts from sep	arate pages, if any.		+ \$_		0.00	\$	0.00	
Calculate your total current me each column. Then add the total			5,88	37.60	+	0.00	= \$	5,887.60
Part 2: Determine Whether the	Means Test Applies to You						incom	e
12. Calculate your current monthly	v income for the vear. Follow	these steps:						
12a. Copy your total current mor				Сор	y line 11	here=>	\$	5,887.60
Multiply by 12 (the number	of months in a year)						X	
12b. The result is your annual in	come for this part of the form					12	b. \$	70,651.20
13. Calculate the median family in	come that applies to you. For	ollow these steps:						
Fill in the state in which you live.		ОН						
Fill in the number of people in yo	ur household.	2						
Fill in the median family income To find a list of applicable media for this form. This list may also b	n income amounts, go online ເ	using the link speci	fied in the	e separa	ate instruc	tions 13	. \$	67,059.00
14. How do the lines compare?								
	n or equal to line 13. On the to T fill out or file Official Form 1		box 1, <i>T</i>	here is i	no presun	nption of abu	se.	
Go to Part 3 and fill	an line 13. On the top of page out Form 122A-2.	1, check box 2, Th	e presum	nption of	abuse is	determined i	by Form 1	22A-2.
Part 3: Sign Below								
By signing here, I declare u	nder penalty of perjury that the	e information on thi	is statem	ent and	in any att	achments is	true and c	orrect.
X /s/ Ralph Emanuel A Ralph Emanuel Ande								

Ralph Emanuel Anderson

Debtor 1

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Debtor 1	Ralph Emanuel Anderson	Case number (if known)	
	Signature of Debtor 1		
Da	May 19, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	ո.	

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Fill in the	his information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Debtor 2	Traight Emailed 7 th do roth	According to the calculations required by this Statement:
(Spouse	e, if filing)	There is a supposed to a false.
United S	States Bankruptcy Court for the: Southern District of Ohio	■ 1. There is no presumption of abuse.
Case nu	umber n)	☐ 2. There is a presumption of abuse.
	,	☐ Check if this is an amended filing
Offici	ial Form 122A - 2	
Chap	oter 7 Means Test Calculation	04/1
To fill ou	ut this form, you will need your completed copy of Chapter 7 States	ment of Your Current Monthly Income (Official Form 122A-1).
space is	omplete and accurate as possible. If two married people are filing to needed, attach a separate sheet to this form, Include the line number (if known). Determine Your Adjusted Income	
1. Co	ppy your total current monthly income. Copy line 11	I from Official Form 122A-1 here=> \$ 5,887.60
2. Dic	d you fill out Column B in Part 1 of Form 122A-1?	
	No. Fill in \$0 for the total on line 3.	
	Yes. Is your spouse Filing with you?	
Ι.	■ No. Go to line 3.	
[☐ Yes. Fill in \$0 for the total on line 3.	
ho: On	ljust your current monthly income by subtracting any part of your susehold expenses of you or your dependents. Follow these steps: I line 11, Column B of Form 122A–1, was any amount of the income you penses of you or your dependents?	
	No. Fill in 0 for the total on line 3.	
	Yes. Fill in the information below:	
	State each purpose for which the income was used	Fill in the amount you
	For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	and and the attention frame
		\$
		\$
		\$
	Total.	\$
		Copy total here=> \$ 0.00
4. Ad	ljust your current monthly income. Subtract line 3 from line 1.	\$5,887.60_

Official Form 122A-2

	Docur	nent Page	47 of 62		
Debtor 1	Ralph Emanuel Anderson		Case number	(if known)	
Part 2:	Calculate Your Deductions from Your Income				
to an	nternal Revenue Service (IRS) issues National and L swer the questions in lines 6-15. To find the IRS sta uctions for this form. This information may also be a	ndards, go online	using the link speci	fied in the separate	ints
your	act the expense amounts set out in lines 6-15 regardless actual expenses if they are higher than the standards. Done in line 3 and do not deduct any operating expenses the	o not deduct any ar	nounts that you subt	racted fro your spouse's	e of
If you	er expenses differ from month to month, enter the average	ge expense.			
Wher	never this part of the from refers to you, it means both yo	ou and your spouse	if Column B of Form	122A-1 is filled in.	
5.	The number of people used in determining your ded	uctions from inco	me		
	Fill in the number of people who could be claimed as ex plus the number of any additional dependents whom you the number of people in your household.				
Natio	onal Standards You must use the IRS National	I Standards to answ	er the questions in li	nes 6-7.	
6.	Food plathing and other terms this will a such as of				
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and		in line 5 and the IRS	S National \$	1,292.00
7.		d other items. per of people you en phore of people is spi a higher IRS allowa	tered in line 5 and th it into two categories ince for health care o	e IRS National Standards, people who are under 65	fill in 5 and
7.	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The nun people who are 65 or olderbecause older people have	d other items. per of people you en phore of people is spi a higher IRS allowa	tered in line 5 and th it into two categories ince for health care o	e IRS National Standards, people who are under 65	fill in 5 and
7.	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the addition	d other items. per of people you en phore of people is spi a higher IRS allowa	tered in line 5 and th it into two categories ince for health care o	e IRS National Standards, people who are under 65	fill in 5 and
7.	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The num people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional endough the second of the s	d other items. per of people you en pber of people is spi a higher IRS allowa onal amount on line	tered in line 5 and th it into two categories ince for health care o	e IRS National Standards, people who are under 65	fill in 5 and
7.	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The nun people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the addition the who are under 65 years of age 7a. Out-of-pocket health care allowance per person	d other items. per of people you en pber of people is spi a higher IRS allowa onal amount on line \$ 68.00	tered in line 5 and th it into two categories ince for health care o	e IRS National Standards,people who are under 65 costs. If your actual expens	fill in 5 and
Peop	Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The number of people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional end of the who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65	d other items. per of people you en pber of people is spi a higher IRS allowa onal amount on line \$	tered in line 5 and th it into two categories ince for health care o 22.	e IRS National Standards,people who are under 65 costs. If your actual expens	fill in 5 and
Peop	Out-of-pocket health care allowance: Using the numb dollar amount for out-of-pocket health care. The numb people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional ewho are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b.	d other items. per of people you en pber of people is spi a higher IRS allowa onal amount on line \$	tered in line 5 and th it into two categories ince for health care o 22.	e IRS National Standards,people who are under 65 costs. If your actual expens	fill in 5 and
Peop	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the same of the	ser of people you en ober of people is spin a higher IRS alloward amount on line \$ 68.00 X 2 \$ 136.00	tered in line 5 and th it into two categories ince for health care o 22.	e IRS National Standards,people who are under 65 costs. If your actual expens	fill in 5 and
Peop	Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The numb the dollar amount for out-of-pocket health care. The numb people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b. 9le who are 65 years of age or older 7d. Out-of-pocket health care allowance per person	the other items. there of people you entitle of people is spiral a higher IRS allows and amount on line \$ 68.00 X 2 \$ 136.00	tered in line 5 and th it into two categories ince for health care o 22.	e IRS National Standards,people who are under 65 costs. If your actual expens	fill in 5 and

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Debtor 1 Ralph Emanuel Anderson

Case number (if known)

Loc	al Sta	andards	You mu	st use the	IRS Loca	al Standard	s to ansv	ver the qu	estions in lir	nes 8-15.					
		n informa tcy purpo				Trustee P	rogram l	nas divid	ed the IRS I	₋ocal Stand	dard fo	r housir	ng for		
_		ing and u			•	rating exp	enses								
To a	answ	er the que	estions i	n lines 8-	9, use the	e U.S. Trus	stee Prog	gram cha	rt.						
						ied in the s tcy clerk's		nstructior	ns for this for	m.					
8.	Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 597.00														
9.	Housing and utilities - Mortgage or rent expenses:														
	9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses														
	9b. Total average monthly payment for all mortgages and other debts secured by your home.														
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.														
		Name of	the credit	tor				Average payment	,						
		Fifth Th	nird Ban	k				\$	1,223.04						
		Hunting	gton Nat	tional Ba	ank			\$	101.18						
				Total av	verage mo	onthly payn	nent	\$	1,324.22	Copy here=>	-\$	1	1,324.22	Repeat this amount on line 33a.	
	9c.	Net mort	gage or re	ent expen	se.										
						<i>ly paymen</i> s than \$0,				\$		0.00	Copy here=>	\$	0.00
10.									cal Standard nal amount			correct	and	\$	0.00
	Ex	plain why:	:												
11.	Loc	al transpo	ortation e	expenses	: Check th	he number	of vehicle	es for whi	ich you claim	an owners	hip or o	perating	g expense.		
	□ 0). Go to lin	ne 14.												
	□ 1	. Go to lin	ne 12.												
	2	or more.	Go to line	e 12.											

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

402.00

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btor 1	Ralph Emanuel Ander	son			Case number	(if known)		
13.		e expense: Using the IRS Locanse if you do not make any loar						
Vel	hicle 1 Describe Vehicle	1: 2014 Canam Spyder R Excellent Condition L Canal Winchester OH	ocation:					
13a.	Ownership or leasing costs u	sing IRS Local Standard			\$	533.00		
13b.	Average monthly payment fo Do not include costs for lease	r all debts secured by Vehicle and vehicles.	1.					
		nthly payment here and on line a secured creditor in the 60 more. 0.			at			
	Name of each creditor	for Vehicle 1	Avera	ge monthly ent				
	Park National Bank		\$	149.83				
	Tot	al Average Monthly Payment	\$	149.83	Copy here =>	-\$149	Repeat this amount on line 33b.	
		ease expense Ba. if this amount is less than \$ 2: 2019 Chevrolet Silvera			\$_	383.17	Copy net Vehicle 1 expense here => \$	383.17
VCI	Describe Vericle	Condition Location: 6 Winchester OH 43110	926 Cres					
13d.	Ownership or leasing costs u	sing IRS Local Standard			\$	533.00		
13e.	Average monthly payment fo leased vehicles.	r all debts secured by Vehicle 2	2. Do not	include costs fo	r			
	Name of each creditor	for Vehicle 2	Avera	ge monthly ent				
	Firth Third Bank, NA	4	\$	162.52				
	Wright Patt Credit U	Inion	_ \$	845.00				
	Tot	al Average Monthly Payment	\$	1,007.52	Copy here => -\$ _	1,007.5	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or le Subtract line 13e from line 13	ease expense 3d. if this amount is less than \$	0, enter \$	0	. \$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		nse: If you claimed 0 vehicles in wance regardless of whether you				ards, fill in the	Public \$	0.00
15.	also deduct a public transpor	ation expense: If you claimed tation expense, you may fill in Local Standard for Public Tran	what you	believe is the a				0.00

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Debtor 1	Ralph Emanuel Anderson	Case number (if known)	

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Debtor 1 Ralph Emanuel Anderson Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soc your pay for these taxes. He	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 om the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	sales, or use taxes.	\$	1,406.41
17.	Involuntary deductions: T contributions, union dues, a	the total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	175.69
18.	filing together, include payn	nonthly premiums that you pay for your own term life insurance. If two married people are nents that you make for your spouse's term life insurance. Do not include premiums for life nts, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.		The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments or	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	nly amount that you pay for education that is either required:		
	as a condition for your jo	bb, or		
	for your physically or me	entally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments fo	r any elementary or secondary school education.	\$	0.00
22.	that is required for the healt	benses, excluding insurance costs: The monthly amount that you pay for health care the and welfare of you or your dependents and that is not reimbursed by insurance or paid to the line only the amount that is more than the total entered in line 7.		64.00
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	64.00
23.	for you and your dependent	elephone services: The total monthly amount that you pay for telecommunication services its, such as pagers, call waiting, caller identification, special long distance, or business cell to necessary for your health and welfare or that of your dependents or for the production of ed by your employer.		
		r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	0.00
24.	Add all of the expenses at Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	4,456.27

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Debtor 1 Ralph Emanuel Anderson Case number (if known)

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.					
	Note: Do not include any expense allowances listed in lines 6-24.					
25.	Health insurance, disability insurance, and health savin insurance, disability insurance, and health savings accounts your dependents.					
	Health insurance \$	0.00				
	Disability insurance \$	0.00				
	Health savings account + \$	0.00				
	Total \$	0.00	Copy total here=>	\$	0.00	
	Do you actually spend this total amount?					
	□ No. How much do you actually spend?	ħ				
		\$				
26.	Continued contributions to the care of household or far continue to pay for the reasonable and necessary care and your household or member of your immediate family who is include contributions to an account of a qualified ABLE prog	support of an elderly unable to pay for su	c, chronically ill, or disabled member of ch expenses. These expenses may	\$	0.00	
27.	Protection against family violence. The reasonably necessafety of you and your family under the Family Violence Presented States of the Protection against family violence.					
	By law, the court must keep the nature of these expenses c	confidential.		\$	0.00	
28.	28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.					
	If you believe that you have home energy costs that are mo 8, then fill in the excess amount of home energy costs.	ore than the home en	ergy costs included in expenses on line			
	You must give your case trustee documentation of your actuamount claimed is reasonable and necessary.	ual expenses, and yo	ou must show that the additional	\$	0.00	
29.	Education expenses for dependent children who are yo \$170.83* per child) that you pay for your dependent children public elementary or secondary school.					
	You must give your case trustee documentation of your actuclaimed is reasonable and necessary and not already according to the control of the					
	* Subject to adjustment on 4/01/22, and every 3 years after	that for cases begun	on or after the date of adjustment.	\$	0.00	
30.	O. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.					
	To find a chart showing the maximum additional allowance, instructions for this form. This chart may also be available a					
	You must show that the additional amount claimed is reason	nable and necessary		\$	0.00	
31.	Continuing charitable contributions. The amount that you instruments to a religious or charitable organization. 26 U.S		tribute in the form of cash or financial	+\$	0.00	
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	0.00	

Debtor 1 Ralph Emanuel Anderson

Case number (if known)

Deduc	ctions for Debt Payment						
	or debts that are secured by an intere ans, and other secured debt, fill in lin	st in property that you own, including home mes 33a through 33e.	ortg	ages, vehicle			
	o calculate the total average monthly pay editor in the 60 months after you file for	ment, add all amounts that are contractually due bankruptcy. Then divide by 60.	to ea	ach secured			
	Mortgages on your home:						erage monthly yment
33a.	Copy line 9b here				=>	\$	1,324.22
	Loans on your first two vehicles:						
33b.	Copy line 13b here				=>	\$	149.83
33c.	0 " 10 1				=>	\$	1,007.52
33d.	List other secured debts:						
Name (of each creditor for other secured debt	Identify property that secures the debt		Does paym include tax insurance?	es or		
	Citizens One Consumer Loan Servicing	2019 Dodge Charger 17,000 miles SRT, 4 dr, Good Condition Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110		■ No		\$	853.63
_	Performance Finance	2012 Victory Kingpin 7500 miles Good Condition Location: 6926 Crescent Boat Lane, Canal Winchester OH 43110		■ No		<u>-</u> \$	59.11
-				П No		Ψ_	
				_ 110			
_				☐ Yes		+\$	
33e.	Total average monthly payment. Add lin	es 33a through 33d\$	§	3,394.3	.	Copy total here=>	\$3,394.31_
or		secured by your primary residence, a vehicle, pport or the support of your dependents?					
		pay to a creditor, in addition to the payments					
_		sion of your property (called the <i>cure amount</i>).					
Name	e of the creditor	Identify property that secures the debt		Total cure amount			Monthly cure amount
Fifth	n Third Bank	6926 Crescent Boat Lane Canal Winchester, OH 43110 Franklin County 1500 sq. ft ranch, finished basement, 4 BR, 3 BA	\$	5,322.18	3 ÷ (60 = \$	88.70
			_ \$		_ ÷6	50 = \$	
			_ \$		_ ÷6	60 = + \$	
		Total \$	6	88.70	_	Copy total here=>	\$ 88.70
		1,516.					•

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Debtor 1	Ralp	h Emanuel Anderson	Case number (if known)		
		we any priority claims such as a priority tax, child support, or alimony due as of the filing date of your bankruptcy case? 11 U.S.C. \S 507.	that		
	No.	Go to line 36.			
Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.					
		Total amount of all past-due priority claims	\$ 0	0.00 ÷ 60 = \$	0.00

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Debtor 1	Ralp	h Emanuel Anderson		Ca	se nı	umber (if known)
Fo	r more	eligible to file a case under Chapter 13? 11 U.S.C. § 1 information, go online using the link for Bankruptcy Basins for this form. Bankruptcy Basics may also be available	cs spec			
	No.	Go to line 37.				
		Fill in the following information.				
		Projected monthly plan payment if you were filing under	Chapte	er 13	\$	
		Current multiplier for your district as stated on the list is: Administrative Office of the United States Courts (for dis and North Carolina) or by the Executive Office for Unite (for all other districts).	stricts ir	n Alabama	X	
		To find a list of district multipliers that includes your dist the link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Copy total
		Average monthly administrative expense if you were filing	ng unde	er Chapter 13		\$ here=> \$
		of the deductions for debt payment. s 33e through 36.				\$3,483.01_
Total	Deduc	tions from Income				
38. Ac	ld all o	f the allowed deductions.				
		e 24, All of the expenses allowed under IRS e allowances	\$	4,456.2	7_	
C	opy lin	e 32, All of the additional expense deductions	\$	0.0	0	
C	opy lin	e 37, All of the deductions for debt payment	+\$_	3,483.0	1	٦
		Total deductions	\$	7,939.2	8	Copy total here=> \$7,939.28
Part 3:	Det	ermine Whether There is a Presumption of Abuse				
39. C a	lculate	e monthly disposable income for 60 months				
3	9a. Co	py line 4, adjusted current monthly income	\$	5,887.6	0	
3	9b. Co	py line 38, <i>Total deductions</i>	- \$ _	7,939.2	8_	
3		nthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$_	-2,051.6	8	Copy here=>\$ -2,051.68
F	or the	next 60 months (5 years)				x 60
3	9d. To	tal. Multiply line 39c by 60	3	39d. \$	123	3,100.80 Copy -123,100.80
40. Fi r	nd out	whether there is a presumption of abuse. Check the l	oox tha	t applies:		
	■ The line 39d is less than \$8,175*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.					
		ine 39d is more than \$13,650*. On the top of page 1 of if you claim special circumstances. Go to Part 5.	this for	m, check box 2,	The	ere is a presumption of abuse. You may fill out
	The li	ine 39d is at least \$8,175*, but not more than \$13,650	*. Go to	line 41.		
*S	ubject t	to adjustment on 4/01/22, and every 3 years after that for	cases	filed on or after	the	date of adjustment.

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Debtor 1	Ralp	oh Emanuel Anderson	Case number (if known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled on A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.			
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)	(I) \$	Copy here=>	\$
25	% of y	Multiply line 41a by 0.25 ne whether the income you have left over after subtracting all allowed de your unsecured, nonpriority debt. le box that applies:			
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> part 5.	ere is no presumption of abu	se.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, che umption of abuse. You may fill out Part 4 if you claim special circumstances. The			
Part 4:	Giv	ve Details About Special Circumstances			
reas	lo. Go es. Fil ite You ne ad	we any special circumstances that justify additional expenses or adjustmental expenses and pushes alternative? 11 U.S.C. § 707(b)(2)(B). To to Part 5. I in the following information. All figures should reflect your average monthly expenses you listed in line 25. The purpose of the special circumstances that make the excessary and reasonable. You must also give your case trustee documentation ligustments.	xpense or income adjustmen expenses or income adjustr of your actual expenses or i	nt for ea ments income	
	G		Average monthly expense or income adjustment		
	_		\$		
	_		\$		
	_		\$	_	
			\$		
Part 5:	Sic	gn Below			
art or	_	gning here, I declare under penalty of perjury that the information on this state	ment and in any attachments	s is true	and correct.
	Y /s.	/ Ralph Emanuel Anderson	·		
	Ra	alph Emanuel Anderson gnature of Debtor 1			
Da	te M a	ay 19, 2021			
	M	M/DD/YYYY			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Citizens One Consumer Loan Servicing PO Box 42033 Providence, RI 02940-2033

City of Columbus - Public Utilities 910 Dublin Road Columbus, OH 43215-1169

Donna Anderson 6926 Crescent Boat Lane Canal Winchester, OH 43110

Fifth Third Bank PO Box 630412 Cincinnati, OH 45263-0412

Firth Third Bank, NA PO Box 674 Wilmington, OH 45177

Home Depot PO Box 9001010 Louisville, KY 40290-1010

Huntington National Bank PO Box 182387 Columbus, OH 43218-2387

Licking Memorial Hospital 1320 West Main Street Newark, OH 43055

Mount Carmel East 417 Bridge Street Danville, VA 24541-1403

Mount Carmel Health Providers Dr. Essa Essa 85 McNaughten Road, Unite 130 Columbus, OH 43213

Park National Bank 1 South Main Street Mount Vernon, OH 43050

Performance Finance 10509 Professional Circle, Suite 100 Reno, NV 89521

Polaris Surgery Center 300 Polaris Parkway, Suite 1400 Westerville, OH 43082-7990 Progressive Motorcycle Insurance PO Box 31260 Tampa, FL 33631

South Central Power Co. 2780 Coonpath Road Lancaster, OH 43130

Tyler Anderson 6926 Crescent Boat Lane Canal Winchester, OH 43110

Tyler Anderson 6926 Cresent Boat Lane Canal Winchester, OH 43110

Wright Patt Credit Union PO Box 886 Wilmington, OH 45177